

Rural Innovation Profile

Iowa Community Health Centers and Value-Based Care

What: Bringing three organizations together under one umbrella to enhance community health centers' (CHCs) capacity as they advance and invest in value-based contracting across the state.

Why: Striving to achieve a vision of health equity for all.

Who: The Iowa Primary Care Association, a network of all 14 CHCs in Iowa; INConcertCare, a sister organization focused on data analytics and population health; and IowaHealth+ a clinically integrated network of primary care providers owned and managed by 11 CHCs as a joint venture with the Iowa Primary Care Association.

How: Three organizations that work as one with a shared mission, vision, and values to form a clinically integrated network for value-based care.

Key Points

- Utilize a joint mission, vision, values, and strategic plan to facilitate all organizations moving in the same strategic direction.
- Integrate and leverage the resources of the three CHC-focused organizations to optimize value-based payment opportunities, and drive impact and outcomes.
- Use data and engage members and other stakeholders to support value-based care delivery through peer learning, addressing social drivers of health, improving quality of care and patient outcomes, decreasing health care costs, and advancing health equity for all.



OVERVIEW

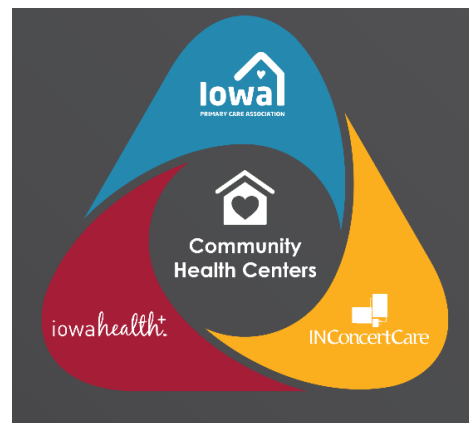
Iowa Primary Care Association (Iowa PCA), IowaHealth+, and INConcertCare are collaborating as a network to leverage resources in support of community health centers (CHCs) across Iowa. With shared common visions, missions, and values, the three organizations have established a common strategic plan that supports a clinically integrated network for Medicaid and Medicare value-based care (VBC) contracting.

BACKGROUND

The Iowa PCA is comprised of 14 CHCs, 13 that are traditional Federally Qualified Health Clinics (FQHC), and one that is a migrant farm worker program. The CHCs are geographically located throughout both urban and rural Iowa, serving nearly 250,000 Iowans each year through approximately 900,000 patient visits. Using an integrated care model, Iowa's CHCs provide medical, behavioral health, oral health, and pharmacy services, often under one roof. The Iowa PCA is dedicated to developing a state-wide primary care focused health system that transforms practices driven by value-based payment reform. The Iowa PCA focuses on CHC policy and advocacy, quality and performance improvement, emerging programs, operations and development, training and technical assistance, and other areas to support the CHC model. Complementing this work, the Iowa PCA also manages two sister companies: INConcertCare and IowaHealth+. INConcertCare, the technology arm of the three organizations, focuses on data analytics and population health. IowaHealth+ is an integrated primary care network that includes 11 of the 14 member CHCs.

PARTNERSHIP TO SUPPORT VALUE BASED CARE

Starting in 2011, 11 of the Iowa CHCs and the Iowa PCA formed a clinically integrated network and considered applying to CMS to participate in the Medicare Shared Savings Program. However, the network had insufficient attributable lives to enter the program and recognized that many of the metrics used by the Centers for Medicare & Medicaid Services (CMS) were not aligned with the strategic mission of CHCs. Since the network includes CHCs serving communities throughout Iowa and refers patients to various hospitals (both systems-based hospitals, managed, and independent) around the state, it was important for the network to avoid joining a hospital system-based accountable care organization (ACO). IowaHealth+ decided to pursue value-based care opportunities for other populations, before joining the Medicare Shared Savings Program in 2022.



“Community health centers put patients at the core of their care, treating them as individuals, honoring their traditions, and valuing their experiences.”

***Amanda Gerardy
Senior Value-Based Care
Consultant, Iowa PCA***





In 2014, eager to engage in value-based care (VBC) after Medicaid expansion in Iowa, the network entered a VBC contract with the state of Iowa for Medicaid. This was possible because of the state's 1115 waiver that allowed ACOs to be formed and deliver care to an expanded population. Over the next few years, the clinically integrated network was branded as IowaHealth+ and now provides both a primary care-focused system of care and a "one-stop shop" for patients, payors, and partners. VBC contracts were later initiated with Medicaid managed care organizations (MCOs). Operational for almost 10 years, IowaHealth+ NOW serves over 250,000 patients, including 72,000 attributed Medicaid lives and over 6,000 attributed Medicare fee-for-service patients.

IowaHealth+ is also engaging with [Main Street Health](#), a value-based healthcare company, to expand value-based contracting and provide more comprehensive, integrated primary care to patients with Medicare Advantage Plans. Main Street Health contracts directly with the Medicare Advantage plans, accepting value-based care risk, then contracts with IowaHealth+ to deliver primary care and care coordination services. Main Street Health embeds health navigators into the CHCs to support patient engagement and documentation. This partnership allows IowaHealth+ to continue to build upon the VBC work they and the CHCs provide.

For data analytics, IowaHealth+ utilizes an [Arcadia](#) healthcare analytics product that aggregates data from different electronic health records (EHRs) and claims data so network members can see how patients are accessing care across the continuum, better coordinate care, and meet the needs of the patients they serve. To do this, dashboards for network and health center team members are created and shared. The dashboards include clinical quality performance (e.g., Healthcare Effectiveness Data and Information Set and Uniform Data System data), utilization management (e.g., medical expense management, emergency department high utilization data), patient registries (e.g., pre-visit planning, immunizations), risk assessment (e.g., risk gaps), and operations detail (e.g., charge capture, medication management).

For planning purposes, IowaHealth+ has developed two strategic roadmaps. Roadmap 1.0 focused on payor relations and establishing the network by:

- Driving better values and vision alignment with payors.
- Encouraging more transparency regarding business imperatives and drivers.
- Getting payors to think past short-term business cycles.
- Developing partnerships with payors prior to entering the market.

“The collaboration between Iowa’s community health centers is key to IowaHealth+’s strong performance, allowing us to scale resources and collectively improve the health of our patients.”

***Amanda Gerardy,
Senior Value-Based Care
Consultant, Iowa PCA***





Most recently, IowaHealth+ Roadmap 2.0 focuses on developing a more robust set of services and a foundation for sustainability, including focusing on the strategic needs and goals of the network, aligning shared services, risk profiling, detail defining network and members roles, and formalizing key focus areas that will allow CHCs to be financially and organizationally sustainable well into the future.

NEXT STEPS

Moving forward, INConcertCare, through a partnership with [OCHIN](#), a national membership organization that supports technology and workforce solutions targeted towards rural and medically underserved communities, will be supporting the transition of 11 of Iowa's CHCs to an Epic EHR with planned go-live dates from August through November 2023. This move will not only advance the network's access to data, but it will support clinical documentation standardization propelling the network forward in improving clinical quality outcomes, care coordination, overall analytics and reporting, and provider satisfaction. Individual CHCs will also have better access to patient level data and the ability to improve bidirectional patient communications by way of an enhanced patient portal. Through enhanced patient engagement, the new technology will put powerful tools into the hands of patients, providing them with significantly improved access to their own health information, helping them stay in contact with their care teams, and consequently making the best healthcare decisions they can for themselves.

Also, underway and as a part of Roadmap 2.0, is the network's Advancing Health Equity and Addressing Disparities (AHEAD) Strategy which includes four action steps: health equity assessment, developing a unified health equity implementation plan, strategic consultation, and training and education. Health equity is the backbone of CHCs, and this intentional focus supports the three organizations' vision of health equity for all and further supports the delivery of equitable care to under-resourced communities. The intent is to both use this as an opportunity to inform future strategy but also integrate equity achievement into the Iowa PCA, community health centers, and IowaHealth+ Roadmap 2.0 strategic plans.

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